SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

16 X 17a 17b 17c 17d 18
19a 19b 20a 20b 20c 21

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	NAME OF COMMITTEE	(In Full)	
- 1	~		

Full Name (Last, First, Middle Initial) Kristine Baptiste		Transaction ID : C27630772
Mailing Address 25865 Pinebluff Dr		Date of Receipt 10 23 2012
City South Riding	State Zip Code VA 20152-1725	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Homemaker	Occupation Homemaker	56.00
Receipt For: 2012 Primary ☐ General Other (specify) ▼	Election Cycle-to-Date ▼ 491.00	
Full Name (Last, First, Middle Initial) Marc Baptiste		Transaction ID : C29528565 Date of Receipt
Mailing Address 830 nw 115th ave		M M / D D / Y Y Y Y Y 1 1 1 03 2012
City plantation	State Zip Code FL 33325	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer MHS Health Center	Occupation Physician	250.00
Receipt For: 2012 Primary	Election Cycle-to-Date 1250.00	
Full Name (Last, First, Middle Initial) Marc Baptiste	'	Transaction ID : C29665474 Date of Receipt
Mailing Address 830 nw 115th ave		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City plantation	State Zip Code FL 33325	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer MHS Health Center	Occupation Physician	250.00
Receipt For: 2012 Primary ☐ General Other (specify) ▼	Election Cycle-to-Date 1250.00	
Subtotal Of Receipts This Page (op	tional)	556.00